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November 29, 2005

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RE: U.S. Patent Application of John M. Jones, et al.

Entitled: "Liner Panel Having Barrier Layer"

Serial No.: 10/645,223 Our Ref: 11283/09054

Dear Sir:

The following are being transmitted herewith:

- 1. Transmittal sheet (original plus 1 copy (2 sheets))
- 2. Fee transmittal sheet (1 sheet)
- 3. Amendment (21 sheets)
- 4. Check in the amount of \$2,000.00 (extra claims)
- 5. Return Postcard

Please charge any deficiency or credit any overpayment required by this action to our Deposit Account No. 50-1196, for which purpose an extra copy of this transmittal letter is attached.

Kyle M. Globerman Reg. No. 46,730

Very truly yours.

I hereby certify that this paper and any referenced attachment and/or fee are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: November 29, 2005

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Signature

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under in Panerwork Respiration	n Act of 1995	no persons are requ	uired to res	spond to a collection	of informa	ation unless it displays	a valid OMB control number	
Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Num	ber 1	10/645,223		
FEE TRANSMITTAL For FY 2005				Filing Date	А	ugust 20, 2003		
				First Named Inve	entor J	ohn M. Jones		
Applicant claims small	7	Examiner Name	J	Jason S. Morrow				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	3	3612		
TOTAL AMOUNT OF PAYN	IENT (\$)	2,000.00		Attorney Docket	No. 1	1283/09054		
METHOD OF PAYMENT	(check all	that apply)						
Check Credit C	ard h	Money Order	Non	e Other (n)	langa idan	sign.		
Check Credit Card Money Order Other (please identify): Deposit Account Perceit Account Number 50 1106								
Deposit Account Deposit Account Number: 50-1196 Deposit Account Name: Nelson Mullins LLP et al. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
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Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR	1.16 and 1.	17		V. TA Cledit	•	payments		
WARNING: Information on this information and authorization of	form may be on PTO-2038	come public. Credi	t card info	ormation should no	t be inclu	ded on this form. Pro	vide credit card	
FEE CALCULATION			_					
1. BASIC FILING, SEAR	CH, AND I	EXAMINATION	FEES			· · · · ·		
·	FILING I	FEES		CH FEES	EXAMI	NATION FEES		
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65	N/A N/A	
Plant	200	100	300	150	160	80	N/A	
Reissue	300	150	500					
Provisional	200			250	600	300	N/A	
2. EXCESS CLAIM FEE		100	0	0	0	0	N/A	
Fee Description Fee (\$)							Small Entity Fee (\$)	
Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent claims 360							180	
<u>Total Claims</u> 109 88 - 26 or HP =	Extra Clain			Paid (\$)			pendent Claims	
HP = highest number of total	Jaims paid fo	x <u>50.00</u>	_=	0.00		Fee (\$)	Fee Paid (\$)	
	Extra Clain		Fee	Paid (\$)		<u>N/A</u>	N/A	
	10	× _200.00		00.00				
HP = highest number of indeposit. 3. APPLICATION SIZE F		paid for, if greater th	an 3.					
If the specification and		xceed 100 sheet	s of pap	er (excluding el	lectronic	ally filed sequence	ce or computer	
listings under 37 CF	R 1.52(e))	, the application	size fee	due is \$250 (\$1	125 for s			
sheets or fraction the	reof. See	35 U.S.C. 41(a)	(1)(G) a	nd 37 CFR 1.16	5(s).			
<u>NA - 100 = </u>	Extra Shee	<u></u>	r of eacr	n additional 50 or (round up to a w				
4. OTHER FEE(S)							Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							N/A	
Other (e.g., late filing	surcharge						N/A	
UBMITTED BY	717			1				
gnature Registration No. 46,730 Telephone (404) 8							² (404) 817-6204	
ame (Print/Type/ Kyle M. Globerman Date November 2								

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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